

Substitute for form 1449A/PTO INFORMATION DISCLOSURE STATEMENT BY APPLICANT (Use as many sheets as necessary)	Complete if Known <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%;">Application Number</td> <td>10/518,453</td> </tr> <tr> <td>Filing Date</td> <td>July 12, 2005</td> </tr> <tr> <td>First Named Inventor</td> <td>MAYNE, Martine</td> </tr> <tr> <td>Group Art Unit</td> <td>1793</td> </tr> <tr> <td>Examiner Name</td> <td>Daniel McCracken</td> </tr> </table>	Application Number	10/518,453	Filing Date	July 12, 2005	First Named Inventor	MAYNE, Martine	Group Art Unit	1793	Examiner Name	Daniel McCracken
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Sheet 1 of 1	Attorney Docket No: 13777-37										

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EXAMINER

DATE CONSIDERED